



## COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS

PUBLIC SCHOOL SYSTEM  
TRAVEL AUTHORIZATION

SAIPAN, MP 96950

Office of the Legal Counsel

1. NO. TY76812. Feb. 7, 20073. 3/92  
Program/School4. NAME Jim Brewer5. OFFICIAL STATION Los Angeles6. TITLE Expert Witness23317. ACCOUNTING OFFICE Saipan

You are authorized to travel below and to incur necessary expenses in accordance with applicable laws and regulations.

8. FROM:

Los Angeles

9. TO:

Saipan/Return

10. PAYMENT TO TRAVELER:

Check No. PV4 111868Amount \$ 1877.56Issued by: 902 1514.70Date 3392.26

Travelers Signature \_\_\_\_\_

## 11. PURPOSE AND REMARKS:

To testify in the Lisa Black lawsuit which Jury Trial begins on February 20, 2007. Jim is a critical witness in this matter and he is needed to prepare prior to the set date of the trial.Travel to be performed in the best interest of the CNMI Public School System. (for reimbursement)

## 12. PER DIEM ALLOWANCE

11 days Meals - 704.00  
 Hotel / car package  
 Per Diem 484.00

## 13. PAYMENT TO CARRIER/TRAVEL AGENCY

Name of Travel Agency or Carrier: \_\_\_\_\_

Invoice No. \_\_\_\_\_ Date \_\_\_\_\_ Amount \_\_\_\_\_

Based on Itinerary and Quotation

Issued by \_\_\_\_\_

14. PERIOD OF TRAVEL: Beginning on or about

2/18/07Ending on or about 3/02/07

## MODE OF TRAVEL

15. ☐ Common Carrier16. ☐ Business Class17. ☐ PSS-owned conveyance18. ☐ Privately owned \_\_\_\_\_ at a mileage rate of \_\_\_\_\_ cents, subject to:(a) ☐ Administratively to be to the advantage of the Public School System(b) ☐ Not to exceed cost by common carrier, including consideration of Per Diem allowance.

## MISCELLANEOUS

19. ☐ Transportation immediate family21. ☐ Shipment house goods and personal effects20. ☐ Other (specify)Car Rental: 48.00x 496.00

Approved By: \_\_\_\_\_

Roman C. Benavente  
 Chairman, BOE

## ESTIMATED COST

22. Transportation Meals/Hotel 1877.5623. Per Diem Car rental 1188.0024. Other Car rental 496.0025. TOTAL 3560.5626. CHARGED TO: 71002-4285-51027. Tim Thornburgh, Acting Dir. of Fiscal & Budget

(FISCAL OFFICER'S SIGNATURE)

28. \_\_\_\_\_

March M. Klaver  
 (REQUESTOR'S SIGNATURE)

PSS Legal Counsel  
 TITLE

Roman C. Benavente  
 TITLE

29. \_\_\_\_\_

(AUTHORIZING OFFICER'S SIGNATURE)

Chairman

TITLE

TRAVELER'S COPY : WHITE

VOUCHER COPY : CANARY

FILE COPY : PINK

ACCOUNTING COPY : GOLDENROD



COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS  
PUBLIC SCHOOL SYSTEM  
TRAVEL AUTHORIZATION  
SAIPAN, MP 96950

1. NO. 747874  
2. Feb. 22, 2007  
(DATE)

3. Office of the Legal Counsel  
Program/School

4. NAME Florine Hofschneider 5. OFFICIAL STATION Saipan

6. TITLE Principal 7. ACCOUNTING OFFICE Saipan

You are authorized to travel below and to incur necessary expenses in accordance with applicable laws and regulations.

PLACES OF TRAVEL

8. FROM: Tinian  
9. TO: Saipan/Return

10. PAYMENT TO TRAVELER:

Check No. PV# 112267  
Amount 90% \$57  
Issued by: \_\_\_\_\_  
Date \_\_\_\_\_  
Travelers Signature \_\_\_\_\_

11. PURPOSE AND REMARKS:

To testify as a witness of PSS in the case of, Lisa Black vs. Jim Brewer, et. al, Civil Action no. 05-0038. Travel to be performed in the best interest of the CNMI Public School System.

12. PER DIEM ALLOWANCE

Subsistence

13. PAYMENT TO CARRIER/TRAVEL AGENCY

Name of Travel Agency or Carrier: \_\_\_\_\_  
Invoice No. \_\_\_\_\_ Date \_\_\_\_\_ Amount \_\_\_\_\_  
Based on Itinerary and Quotation  
Issued by \_\_\_\_\_

14. PERIOD OF TRAVEL: Beginning on or about 2/23/07 Ending on or about 2/23/07

MODE OF TRAVEL

15. ☒ Common Carrier 16. ☐ Business Class 17. ☐ PSS-owned conveyance  
18. ☒ Privately owned \_\_\_\_\_ at a mileage rate of \_\_\_\_\_ cents, subject to:  
(a) ☐ Administratively to be to the advantage of the Public School System  
(b) ☐ Not to exceed cost by common carrier, including consideration of Per Diem allowance.

MISCELLANEOUS

19. ☐ Transportation immediate family 21. ☐ Shipment house goods and personal effects  
20. ☐ Other (specify) \_\_\_\_\_

ESTIMATED COST

22. Transportation ----- \$ 64.00  
23. Per Diem ----- \$ 64.00  
24. Other -----  
25. TOTAL ----- \$ 128.00  
26. CHARGED TO 71000-4826-840

28. Karen M. Klaver  
(REQUESTOR'S SIGNATURE)

PSS Legal Counsel  
TITLE

29. Dr. David M. Borja, D.B.A.  
(AUTHORIZING OFFICER'S SIGNATURE)

Commissioner of Education  
TITLE

27. Tim Thornburgh, Acting Fiscal & Budget Officer  
(FISCAL OFFICER'S SIGNATURE)



To: jacinta kapileo  
Company: public school systems

www.fedexkinkos.com  
1-800-254-6567

## Videoconferencing Receipt

Customer: public school systems  
Booked By: jacinta kapileo  
Attendees: jacinta kapileo

Tracking #: 50281525 Date: 2/23/2007

Location	Qty/List Price Per Minute	Disc.	Price Per Minute	Tax	Amount
Las Vegas NV Sahara Pavillion N (702) 870-7011 Fax: (702) 870-3411	120 \$4.42	\$0.00	\$4.42	\$0.00	\$530.40

Total Charges for Tracking #: 50281525	SUBTOTAL:	\$530.40
Visa *****2284	TAX:	\$0.00
04/07 karen m klazer	TOTAL:	<b>\$530.40</b>

If you have questions regarding your conference receipt, please contact  
FedEx Kinko's billing and support at VTC.Support@fedexkinkos.com or 888-882-5869.

**Thank you for videoconferencing at FedEx Kinko's.**





Public School System  
Small/Emergency  
Purchase Order

P.O. BOX 501370  
SAIPAN, MP 96950

**PURCHASE ORDER**

NUMBER 48179 OL

<b>VENDOR</b>		<b>VENDOR NO.</b> 2770		<b>BILLING INSTRUCTIONS</b>		<b>SHIPPING INSTRUCTIONS</b>	
Dolores Taman c/o KARIDAT P.O. Box 500745 Saipan, MP 96950 Tel. # 234-6981				NO PAYMENT WILL BE MADE UNLESS THE PURCHASE ORDER NUMBER SHOWN ABOVE IS INDICATED ON ALL INVOICES, PACKAGES AND CORRESPONDENCE		SHIP TO: PSSPANDS PO# CNMI PUBLIC SCHOOL SYSTEM P.O. BOX 1370 CK SAIPAN, MP 96950  All Correspondence other than payment requests should be referred to this address and must indicate PO Number.	
<b>FOB POINT</b>		<b>Delivery Time</b>		<b>Discount Terms</b>		<b>SHIP VIA:</b>	
SUSUPE		ASAP		N/A		HAND-DELIVERY	
<b>DESCRIPTION OF ARTICLES</b>				<b>QTY</b>	<b>UNIT</b>	<b>UNIT PRICE</b>	<b>AMOUNT</b>
PSS' witness testified in the case (Jury Trial) of, Lisa Black vs. Jim Brewer, et. al., Civil Action no. 05-0038 on 2/20/07.							
WITNESS FEE -----				1	ea.	\$40.00	40 00
<p><b>NOTE TO VENDOR:</b></p> <p>Please provide a copy of invoice showing receipt of goods/merchandise to: PSS PROCUREMENT &amp; SUPPLY P.O. BOX 500745 SAIPAN, MP 96950</p>							
<b>SPECIAL TERMS &amp; CONDITIONS FOR VENDOR</b>				<b>Total</b>		<b>\$40.00</b>	
<ol style="list-style-type: none"> <li>The above Purchase Order number must appear on all invoices, packages, packing lists, and other related documents.</li> <li>Proof of shipment/delivery of goods or services must be included with all payment requests or invoices.</li> <li>The CNMI Public School System is not responsible for the purchase of articles or services in excess of \$2,500 or above 110% of the amount indicated in TOTAL, whichever is less.</li> <li>Vendors located within the C.N.M.I. must deliver all articles and services within ninety (90) days of certification of funds by PSS.</li> <li>Vendors located outside of the C.N.M.I. must deliver all articles and services within one hundred &amp; eighty (180) days from date of PO approval by Procurement &amp; Supply Officer.</li> <li>Upon completion of delivery/service please mail original Purchase Order and original invoice to: Finance &amp; Budget Office, CNMI Public School System, P.O. Box 1370CK, Saipan MP 96950.</li> </ol>				Amount not to exceed \$2,500.00			
				Requesting Department/School		Date	
				Office of the Legal Counsel		3/1/07	
				Account Number:		School	
				71001. 4201. 570 / 37			
				Certification of Funds		Date	
				Tim Thornburgh, Acting F&B Officer		3/1	
				David M. Borja, D.B.A.		Date	
				Commissioner of Education			

VENDOR



Public School System  
Small/Emergency  
Purchase Order

P.O. BOX 501370  
SAIPAN, MP 96950

**PURCHASE ORDER**

NUMBER **48178 OL**

<b>VENDOR</b>		<b>VENDOR NO.</b> 2569		<b>BILLING INSTRUCTIONS</b>		<b>SHIPPING INSTRUCTIONS</b>	
Ms. Rita Hocog Inos, Ed.D. c/o Northern Marianas College P.O. Box 505119 Saipan, MP 96950		NO PAYMENT WILL BE MADE UNLESS THE PURCHASE ORDER NUMBER SHOWN ABOVE IS INDICATED ON ALL INVOICES, PACKAGES AND CORRESPONDENCE		SHIP TO: PSSPANDS POB CHMI PUBLIC SCHOOL SYSTEM P.O. BOX 1370 CK SAIPAN, MP 96950		All Correspondence other than payment requests should be referred to this address and must indicate PO Number.	
<b>FOB POINT</b>		<b>Delivery Time</b>	<b>Discount Terms</b>	<b>SHIP VIA:</b>			
As Terlaje		ASAP	N/A	Hand-Delivery			
<b>DESCRIPTION OF ARTICLES</b>				<b>QTY</b>	<b>UNIT</b>	<b>UNIT PRICE</b>	<b>AMOUNT</b>
PSS' witness testified in the trial case of Lisa Black vs. Jim Brewer, et. al., Civil Action no. 05-0038 on 2/20/07.							
WITNESS FEE -----				1	ea.	\$40.00	40 00
<b>NOTE TO VENDOR:</b> Please provide a copy of invoice showing receipt of goods/merchandise to: PSS PROCUREMENT & SUPPLY P.O. Box 505119 Saipan, MP 96950							
<b>SPECIAL TERMS &amp; CONDITIONS FOR VENDOR</b>				<b>Total</b>		<b>\$40.00</b>	
1. The above Purchase Order number must appear on all invoices, packages, packing lists, and other related documents.				Amount not to exceed \$2,500.00			
2. Proof of shipment/delivery of goods or services must be included with all payment requests or invoices.				Requesting Department/School		Date	
3. The CHMI Public School System is not responsible for the purchase of articles or services in excess of \$2,500 or above 110% of the amount indicated in TOTAL, whichever is less.				Office of the Legal Counsel		3/1/07	
4. Vendors located within the C.N.M.I. must deliver all articles and services within ninety (90) days of certification of funds by PSS.				Account Number: 71001.4201.570		School	
5. Vendors located outside of the C.N.M.I. must deliver all articles and services within one-hundred & eighty (180) days from date of PO approval by Procurement & Supply Officer.				Certification of Funds Tim Thornburgh, Acting F&B Officer		Date	
6. Upon completion of delivery/service please mail original Purchase Order and original invoice to: Finance & Budget Office, CHMI Public School System, P.O. Box 1370CK, Saipan MP 96950.				David M. Borja, D.B.A. Commissioner of Education		Date	

VENDOR



Public School System  
Small/Emergency  
Purchase Order

P.O. BOX 501370  
SAIPAN, MP 96950

**PURCHASE ORDER**

NUMBER 48158 OL

<b>VENDOR</b>		<b>VENDOR NO.</b> 11451		<b>BILLING INSTRUCTIONS</b>		<b>SHIPPING INSTRUCTIONS</b>	
Ms. Olga Arriola Christian Dior Supervisor DUTY FREE SHOPPERS LTD. P.O. Box 500528 Saipan, MP 96950				NO PAYMENT WILL BE MADE UNLESS THE PURCHASE ORDER NUMBER SHOWN ABOVE IS INDICATED ON ALL INVOICES, PACKAGES AND CORRESPONDENCE		SHIP TO: PSSPANDS PO# CNMI PUBLIC SCHOOL SYSTEM P.O. BOX 1370 CK SAIPAN, MP 96950  All Correspondence other than payment requests should be referred to this address and must indicate PO Number.	
<b>FOB POINT</b>		<b>Delivery Time</b>	<b>Discount Terms</b>	<b>SHIP VIA:</b>			
GARAPAN		ASAP	N/A	HAND-DELIVERY			
<b>DESCRIPTION OF ARTICLES</b>		<b>QTY</b>	<b>UNIT</b>	<b>UNIT PRICE</b>	<b>AMOUNT</b>		
PSS' WITNESS TESTIFIED IN THE TRIAL CASE of, Lisa Black vs. Jim Brewer, et. al., Civil Action no. 05-0038 on 2/20/07.							
WITNESS FEE -----		1	ea.	\$40.00	40 00		
<b>NOTE TO VENDOR:</b> Please provide a copy of invoice showing receipt of goods/merchandise to: PSS PROCUREMENT & SUPPLY P.O. BOX 1370 CK SAIPAN, MP 96950							
<b>SPECIAL TERMS &amp; CONDITIONS FOR VENDOR</b>		<b>Total</b>		<b>\$40.00</b>			
1. The above Purchase Order number must appear on all invoices, packages, packing lists, and other related documents.		Amount not to exceed \$2,500.00					
2. Proof of shipment/delivery of goods or services must be included with all payment requests or invoices.		Requesting Department/School		Date			
3. The CNMI Public School System is not responsible for the purchase of articles or services in excess of \$2,500 or above 110% of the amount indicated in TOTAL, whichever is less.		Office of the Legal Counsel		33/1/07			
4. Vendors located within the C.N.M.I. must deliver all articles and services within ninety (90) days of certification of funds by PSS.		Account Number: 71001. 4201. 520		School			
5. Vendors located outside of the C.N.M.I. must deliver all articles and services within one-hundred & eighty (180) days from date of PO approval by Procurement & Supply Officer.		Certification of Funds		Date			
6. Upon completion of delivery/service please mail original Purchase Order and original invoice to: Finance & Budget Office, CNMI Public School System, P.O. Box 1370CK, Saipan MP 96950.		Tim Thornburgh, Acting F&B Officer		3/5			
		David M. Borja, D.B.A.		Date			
		Commissioner of Education					

VENDOR



Overdue invoices are subject to late charges.

**INVOICE****LAWYERS' SERVICES**

FLR, NAURU BLDG, SUBUR  
 BOX 501902  
 SAIPAN, MP 96950

**SERVICE FOR:**

Heather Kennedy, Esq.  
 Legal Counsel  
 Public School System  
 Capital Hill  
 Saipan, MP 96950

**INVOICE NO.** 230806  
**LSR** MBC

**DATE** August 23, 2006

**PAYMENT DUE DATE** COD

**TO:**  
**ME**

DATE	WORK ORDER DESCRIPTION	RATE	AMOUNT
07-08/06	Transcript of Deposition of Ms. Lisa Black	\$1,452.00	\$1,452.00
	In Re: Civil Action No. 05-0038 Lisa Black vs. Jim Brewer		
			\$1,452.00
			<b>TOTAL DUE</b>

**MAKE CHECKS PAYABLE TO:**  
**LAWYERS' SERVICES**  
 P.O. BOX 501902, SAIPAN, MP 96950

**THANK YOU FOR YOUR BUSINESS!**